

RECEIVED
COURT DOCKET UNIT
UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK 14 AM 10:13

Reveron Rutherford #160867

Reynold Gullman # 173648

Write the full name of each plaintiff.

18 CV 10706

No. (To be filled out by Clerk's Office)

-against-

1. City of New York; 2. New York
Police Department; 3. M.V.P.D Sgt.
Fagan; 4. John Doe # MJV 0483;
5. O Antoni # 111; 6. Ro. Puff # 10

Write the full name of each defendant. If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section IV.

COMPLAINT

(Prisoner)

Do you want a jury trial?

Yes No

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

IV. DEFENDANT INFORMATION

To the best of your ability, provide the following information for each defendant. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are identical to those listed in the caption. Attach additional pages as necessary.

Defendant 1:

<u>City of Mt Vernon</u>		
First Name	Last Name	Shield #
<u>City Hall</u>		
Current Job Title (or other identifying information)		
<u>1 Roosevelt Squrt</u>		
Current Work Address		
<u>Mt Vernon</u>	<u>NY</u>	<u>10550</u>
County, City	State	Zip Code

Defendant 2:

<u>Mt Vernon Police Department</u>		
First Name	Last Name	Shield #
Current Job Title (or other identifying information)		
<u>2 Roosevelt Squrt</u>		
Current Work Address		
<u>Mt Vernon</u>	<u>NY</u>	<u>10550</u>
County, City	State	Zip Code

Defendant 3:

<u>Fayen</u>		
First Name	Last Name	Shield #
<u>MVRD Sergeant</u>		
Current Job Title (or other identifying information)		
<u>2 Roosevelt Squrt</u>		
Current Work Address		
<u>Mt Vernon</u>	<u>NY</u>	<u>10550</u>
County, City	State	Zip Code

Defendant 4:

<u>John</u>	<u>Doe</u>	<u>MVRD 0483</u>
First Name	Last Name	Shield #
<u>MVRD Detective Officer</u>		
Current Job Title (or other identifying information)		
<u>2 Roosevelt Squrt</u>		
Current Work Address		
<u>Mt Vernon</u>	<u>NY</u>	<u>10550</u>
County, City	State	Zip Code

see Attached

Defendant Information: Continued

Defendant 5:

Antonini H. M.

M.W.P.D Narcotic Officer

2 Roosevelt Square

Mt. Vernon NY 10550

Defendant 6:

Poff # 110

M.W.P.D Narcotic Officer

2 Roosevelt Square

Mt. Vernon NY 10550

I. LEGAL BASIS FOR CLAIM

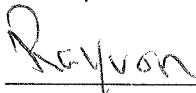
State below the federal legal basis for your claim, if known. This form is designed primarily for prisoners challenging the constitutionality of their conditions of confinement; those claims are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a "Bivens" action (against federal defendants).

Violation of my federal constitutional rights

Other: _____

II. PLAINTIFF INFORMATION

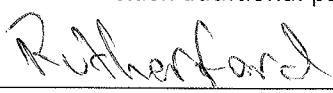
Each plaintiff must provide the following information. Attach additional pages if necessary.

 Rayvon

First Name

 T

Middle Initial

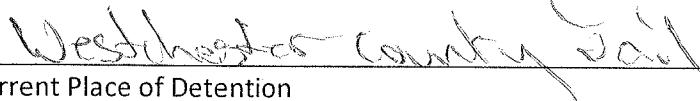
 Rutherford

Last Name

State any other names (or different forms of your name) you have ever used, including any name you have used in previously filing a lawsuit.

 180567

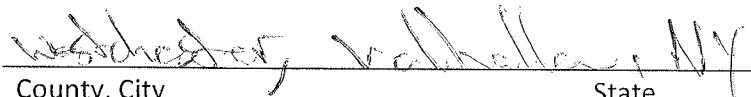
Prisoner ID # (if you have previously been in another agency's custody, please specify each agency and the ID number (such as your DIN or NYSID) under which you were held)

 Westchester County Jail

Current Place of Detention

 10 Weeks Road

Institutional Address

 Westchester, Valhalla, NY

County, City

State

 10595

Zip Code

III. PRISONER STATUS

Indicate below whether you are a prisoner or other confined person:

Pretrial detainee

Civilly committed detainee

Immigration detainee

Convicted and sentenced prisoner

Other: _____

 "Seal Attached"

Continued:

I. LEGAL BASIS FOR CLAIM

State below the federal legal basis for your claim, if known. This form is designed primarily for prisoners challenging the constitutionality of their conditions of confinement; those claims are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a "Bivens" action (against federal defendants).

Violation of my federal constitutional rights

Other: _____

II. PLAINTIFF INFORMATION

Each plaintiff must provide the following information. Attach additional pages if necessary.

Reginald

Buist

Gallman

First Name

Middle Initial

Last Name

State any other names (or different forms of your name) you have ever used, including any name you have used in previously filing a lawsuit.

173648

Prisoner ID # (if you have previously been in another agency's custody, please specify each agency and the ID number (such as your DIN or NYSID) under which you were held)

Vallaha N.Y

Current Place of Detention

Vallaha N.Y Westchester county jail P.O. Box 10

Institutional Address

Westchester Vallaha

County, City

N.Y

State

10595

Zip Code

III. PRISONER STATUS

Indicate below whether you are a prisoner or other confined person:

Pretrial detainee

Civilly committed detainee

Immigration detainee

Convicted and sentenced prisoner

Other: _____

V. STATEMENT OF CLAIM

Place(s) of occurrence: 145 South 1st Ave #86, Mt. Vernon, NY 10550

Date(s) of occurrence: 3/31/17, 04/01/17

FACTS:

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and how each defendant was personally involved in the alleged wrongful actions. Attach additional pages as necessary.

My claims ~~Substantiated~~, excessive force, sexual misconduct, False arrest, Malicious prosecution, as well as violation of my Constitutional rights. These claims stem from on 3/31/17 around midnight, at residence 145 South 1st Ave, Apt. 86. I was visiting a friend when Mt. Vernon Police department broke the door down to execute a Search Warrant. Mt. Vernon Police, narcotics unit entered the apartment with their guns drawn and ordered everyone to the floor. Myself and Plaintiff Reginald Gallman were in the kitchen at the time got down to be handcuffed, once we were cuffed officer Raff #10 and officer Antonini #11 proceeded to Slap, Punch, and kick us while sat on the floor handcuffed. Officer Antonini in a rage hit Plaintiff Gallman multiple times with his firearm, unable to move both Mr. Gallman and myself sat there helplessly while we were beaten for approximately 3-10 minutes Eventually everyone was brought to the living room area so they could conduct their search. At that time apartment owner Michelle Campbell and I

Made the officers aware that I Rayon Rutherford was only a visitor and I had no knowledge of anything to do with any criminal activity going on. Still we were brought to the bathroom one by one, where they did Strip Searches, when I refused to cooperate with the Strip Search another Officer was called into the bathroom. Both officers together forced me to the floor, and held me down by putting their knee on the back of my neck with so much

INJURIES:

See Attached.

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

late asthma attack, headaches, lumps in head swollen face, broken rib cage. Plaintiff Rutherford treated at Mr. Vernon hospital. Plaintiff Gathman denied medical treatment by Mr. Vernon Police

VI. RELIEF

State briefly what money damages or other relief you want the court to order.

Compensatory damages against all defendants in the amount of \$ 60,000,000, Punitive damages against all defendants in the amount of \$ 600,000,000, Nominal damages against all defendants in the amount of \$ 7,000,000. Declaratory Judgment that Plaintiffs' U.S constitutional rights were violated as well as Plaintiffs' human rights.

Facts: Continued

8

Pressure to the point I could not breath and forcing my arm behind my back in a submission lock. Then they forcibly stopped me against my will. Still holding me one of the officers violently stuck their fingers into my rectum. When nothing was found I was let up and told to get dressed and exit the bathroom. I complained to the Supervising officer (Sgt.) and he stated: "It's called a cavity search, and it's totally legal" Furthermore, apartment owner Michelle Campbell surrendered drugs to one of the officers from off her person and told them that she held sole possession of what she gave them, and that everyone else should be let go. However Mt Vernon Police still took me to the Police Station, and I was charged with Criminal Possession of Controlled Substance in the 3rd degree. I was arraigned the following day and forwarded to the Westchester County Jail. I was released about two weeks later and ultimately the charges were dismissed on 4/28/15

Facts: Continued

I Reginald Gallman, my claim stems from the Mt. Vernon police department using violent and excessive force against me while executing a search warrant at my Aunts house Michelle Campbell officer Antonini Walked into the apartment and began to brutally beat me with open and closed fists In a very agitated state, officer Antonini hit me with his gun 3 to 4 times stating "You think your fucking slick, I'll get the last laugh you stupid nigger" Officer Antonini was acting out of anger and retaliation mad at the fact that I would not become a confidential informant and furnish him with information about criminal activity. After this we were brought into the living room then strip searched in the bathroom one by one myself and others.

Reginald R. Gallman

VII. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I understand that if I file three or more cases while I am a prisoner that are dismissed as frivolous, malicious, or for failure to state a claim, I may be denied *in forma pauperis* status in future cases.

I also understand that prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions, 42 U.S.C. § 1997e(a), and that my case may be dismissed if I have not exhausted administrative remedies as required.

I agree to provide the Clerk's Office with any changes to my address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

Dated

11/4/18

Plaintiff's Signature

Stephanie Lovell

First Name

Stephanie

Middle Initial

L

Last Name

Stephanie Lovell

Prison Address

P.O. Box 10

New York

10595

County, City

Velveller

State

Zip Code

Date on which I am delivering this complaint to prison authorities for mailing:

11/4/18

"S-Affached"

(Continued)

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Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

Dated

11/4/18

Plaintiff's Signature

Reginald B. Ballman

First Name

Reginald

Middle Initial

B

Last Name

Ballman

Prison Address

Vallaha N.Y. Westchester County jail P.O. Box 10

County, City

Westchester Vallaha

N.Y.

10595

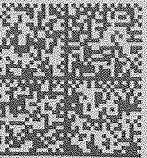
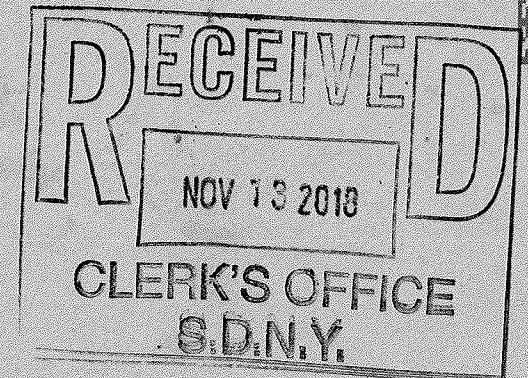
State

Zip Code

Date on which I am delivering this complaint to prison authorities for mailing:

11/4/18

Raymon Rutherford
Jid 180567
P.O. Box 10
Valhalla NY 10595



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U.S. Courthouse - 500 Pearl Street
ATTN - PRO SE Clerk

New York, NY 10007

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